STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist	(s) James J. Bianc	o, Jr.; Adam So	chmidt; Karen Soucy; k	Kathy Corey Fox
II. Name of lobbyist	's partnership, firm or	corporation, if any	y:	
	ssional Association			
(Na	me of partnership, firm or	corporation)		
18 Centre St		Concord	NH	03301
Business Address: (S	treet)	(Town/City)	(State)	(Zip Code)
(603) 225-7170 (Telephone)	(603	3) 226-0165 (Fax)	e-mail attys@b	iancopa.com
III. This statement o reportable expense (covers: (Choose one – f transactions which are	ile separate report: not attributable to	s for each client, OR you ma any one client).	y file a separate report for
X All reportable tra	nsactions occurring in th	ne months prior to th	ne reporting date relative to the	e following client:
NH Manufactu	red & Modular Ho			
OD	(Full Name of Client as	it appears on the Lob	byist Registration Form)	
<u>OR</u>		(including the labb	yist's family), or the lobbying	firm listed below which are
unrelated to any parti		(including the loop	yist's family), of the lobbying	, ithin fisted below which are
IV. Date of Report	April 26, 2017		July 26, 2017 □	
Reports cover: acti	ivity from date of registrati	_	activity from 4/1/17 to 6/30/17 January 31, 2018 🗓	
	October 25, 2017 activity from 7/1/17 to 9/		activity from 10/1/17 to 12/31/	<i>(</i> 17
V. There have bee If this box is checked Concord, NH 03301.	l, complete just this form	nd no reportable and submit it to the	transactions made since to Secretary of State's Office, S	he last report. itate House, Room 204,
VI. Check if additio	nal reports are attache	ed:		
	•		e Addendum A— Fees and Ex	kpenses
☐ If you have paid Expense Reimbursen		ursed expenses, you	ı must file Addendum B – Re	port of Honorariums or
		de political contribu	tions, you must file Addendu	m C-Political Contributions
I have read RSA 15,	ffir nation by Lobbyist RSA 13-B, RSA 14-C a best of my knowledge ar	nd RSA 664 and he	reby swear or affirm that the t	foregoing information is true
(Signature of lobbyi	st)		(Dar	,
James J. Biar	`			RECEIVE
(Print Name of lobb	yist)			_

JAN 3 0 2018

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
Bianco Professional Association	
(Name of partnership, firm or corporation)	
III. Name of Client New Hampshire Manufactured and Modular	_{Date} 01/24/2018
Housing Association	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$5,500
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 24,900
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ _ 2,750
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made landy be filed for the lobbyist(s)/firm aggregate total of all expenses particles; (b) the aggregate total of all expenses; (b) the aggregate total of a let meals purchased during a business than \$10 that is given to the person dwith a value of \$25.00 or less); and the period of greater than \$25.00 for the of greater than \$25, purchase of the trans \$25, but not greater than \$5, expense reimbursement, or political particles.
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$8,250
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$8,250
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
$\forall n$	01/24/2018
(Signature of lobbyist)	(Date)
James J. Bianco, Jr.	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Staten	nent/Aff	irmation	by I	Lobbyist
Statem	ent of	Income	and Expe	ense	s for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association	
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to particular client): NH Manufactured & Modular Housing Association	any
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ October 25, 2017 □ January 31, 2018 🕱	
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above the following Addendums submitted with that Statement (insert the number of Addendum forms by submitted):	, and being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true complete to the best of my knowledge and belief. (Signature of lobbyist) (Date)	e and
Adam Schmidt	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Staten	nent/Aff	irmatio	n by	Lobbyist
Statem	ent of	Income	and Ex	pens	es for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to an					
particular client): NH Manufactur	ed & Modular H	lousing Associati	on		
Date of Report (check one):					
April 26, 2017	7 🗆 October	r 25, 2017 □	January 31, 2018 💢		
I have read RSA 15, RSA 15-B, RSA the following Addendums submitted submitted):	A 664, the Stateme with that Stateme	ent of Income and E ent (insert the numb	Expenses described above, and per of Addendum forms being		
Addendum A(s).					
Addendum B(s).					
Addendum C(s).					
I hereby swear or affirm that the fore complete to the best of my knowledg		on the Statement ar	nd each Addendum is true and		
(Signature of lobbyist)			(Daye)		
Karen Soucy					
(Print Name of lobbyist)					

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partr	nership, firm, or corpo	oration: Bianco Profess	ional Association
			corporation and not related to any
particular client): NH	Manufactured & M	lodular Housing Assoc	ciation
Date of Report (check o	one):		
April 26, 2017 🗆	July 26, 2017 🗆	October 25, 2017 □	January 31, 2018 💢
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s)).		
Addendum B(s)) .		
Addendum C(s)) .		
I hereby swear or affirm complete to the best of			nt and each Addendum is true and
(Signature of lobbyist)	vay fox		/ <u>2016</u> (Date)
Kathy Corey Fox			
(Print Name of lobbyist)		